

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts FF Communication and Communicat			File with: City or Town Cle	erk or Election Commission
Fill in Reporting Period dates: Beginning Date: 01/01	/2019	Ending l	Date: 12/31/2019	
Type of Report: (Check one)	-		7	
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day a	after election	year-end report	dissolution
Mandi Jo Hanneke Candidate Full Name (if applicable)	Committ	ee to Elect Mai	ndi Jo Hanneke Committee Name	
Amherst Councilor-at-Large	Ellen Lin	dcov	Committee Ivanic	
Office Sought and District	- LIICH LIII	Name of Committee Treasurer		
26 Foxglove Ln., Amherst,MA 01002	288 Shays Street, Amherst, MA 01002			
Residential Address				
E-mail: mandijo@votehanneke.org	E-mail:		ellen@votehanneke.d	org
Phone # (optional): 413-687-6765	Phone # (op	tional):	415-518-74	48
SUMMARY BALANC	E INFOR	MATION:		
	- I			
Line 1: Ending Balance from previous report			\$157	.38
Line 2: Total receipts this period (page 3, line 11)			\$0	.00
Line 3: Subtotal (line 1 plus line 2)	,		\$157	.38
Line 4: Total expenditures this period (page 5, line	e 14) [\$0.00		
Line 5: Ending Balance (line 3 minus line 4)		\$157.38		
Line 6: Total in-kind contributions this period (page	ge 6)	6) \$38.80		
Line 7: Total (all) outstanding liabilities (page 7)		\$0.00		.00
Line 8: Name of bank(s) used: Florence Bank				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions ar	nd liabilities for thi h the requirements	s reporting period and repre	f all campaign finance sents the campaign $1/6/2020$
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	v only)			
Candidate with Committee and no activity independent of the committee Certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my kno			
Candidate without Committee OR Candidate with independent activity filing sep I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:	best of my kno , in-kind contri	butions and liabili accordance with the	ties for this reporting period	and represents the

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

DateName and Residential AddressValueDescription, Occupation & EmployerTotal Itemized In-kind Contributions:Total Unitemized In-kind Contributions:\$38.80Total In-kind Contributions:\$38.80